Case 17-31	760 Doc 1	Filed 10/24/17	Entered 10/24/17 12:51:17 Desc Main Page 1 of 50 F I L E D
Fill in this information to ide	ntify your case:		UNITED STATES BANKRUPTCY COURT
United States Bankruptcy Coul	rt for the:		NORTHERN DISTRICT OF ILLINOIS
Northern District of Illinois			OCT 24 2017
Case number (if known):		Chapter you are filing Chapter 7 Chapter 11 Chapter 12 Chapter 13	under: JEFFREY P. ALLSTEADT, CLERK DEPUTY CLERK - VV ☐ Check if this is an amended filing
Official Form 101			
Voluntary Pet	tition for	Individual	s Filing for Bankruptcy 12/15
the answer would be yes if eith Debtor 2 to distinguish betwee same person must be <i>Debtor 1</i> Be as complete and accurate a	ner debtor owns a conthem. In joint case in all of the forms. In spossible, If two needed, attach a seg	er. When information is ses, one of the spouses r narried people are filing t	from both debtors. For example, if a form asks, "Do you own a car," needed about the spouses separately, the form uses <i>Debtor 1</i> and must report information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The together, both are equally responsible for supplying correct. On the top of any additional pages, write your name and case number
	About Debtor 1	•	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	A DOUGH DOUGH	•	About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your government-issued picture identification (for example, your driver's license or	First name		First name
passport). Bring your picture	Middle name Neal		Middle name
identification to your meeting with the trustee.	Last name		Last name
with the trustee.	Suffix (Sr., Jr., II, II	1)	Suffix (Sr., Jr., II, III)
a. All other names you have used in the last 8 years	First name		First name
Include your married or	Middle name		Middle name
maiden names.	Last name		Last name
	First name		First name
	Middle name	A CONTROL OF THE CONT	Middle name
	Last name		Last name
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	OR	8 2 8 6	XXX — XX —
(ITIN)			
fficial Form 101	Volunta	ry Petition for Individual	Is Filing for Bankruptcy page 1

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Debtor 1 La I Oya S First Name Middle	Neal Name Last Name	Case number (if known)
490 till kladdet de læret fra lædet kladet likke kladet blev ockste er her de skrivet er en en en en en en en e I de læret kladet blevet fra læret kladet læret blev ockste er her en	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
. Any business names and Employer	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
Identification Numbers	NEAL C TAY CACIC	
(EIN) you have used in the last 8 years	NEALS TAX OASIS Business name	Business name
Include trade names and		
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	564 GREGORY DRIVE	
	Number Street	Number Street
	UNIT 2C	
	GLENDALE HEIGHTS IL 60139	
	City State ZIP Code	City State ZIP Coo
	DUPAGE	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	PO BOX 485	
	P.O. Box	P.O. Box
	OAK PARK IL 60304 City State ZIP Code	City State ZIP Cod
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor	1	

LaToya S Neal
First Name Middle Name Last Name

Case number (if known)_____

Part	2

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you	Check o for Bank	ne. (For ruptcy (l	a brief description of each, se Form 2010)). Also, go to the to	ee <i>Noti</i>	ce Required by 11 age 1 and check th	U.S.C. § 342(b) for Individuals Filing ne appropriate box.
	are choosing to file under	☐ Cha	pter 7				
	under	☐ Cha	pter 11				
		☐ Cha	pter 12				
		Cha	pter 13				
8.	How you will pay the fee	loca your subr with	l court freelf, you mitting you a pre-p	for more details about how ou may pay with cash, cash your payment on your beha orinted address.	you n nier's d alf, yo	nay pay. Typicali check, or money ur attorney may	pay with a credit card or check
				ay the fee in installments for Individuals to Pay The			
		By la less pay	aw, a ju than 1 the fee	dge may, but is not require 50% of the official poverty	ed to, line th oose th	waive your fee, a at applies to you nis option, you m	ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the Application to Have the with your petition.
9.	Have you filed for	☐ No					
	bankruptcy within the last 8 years?	🗹 Yes.	District	NORTHERN ILLINOI	When	11/26/2014	Case number
	·		District	NORTHERN ILLINOI	When	MM / DD / YYYY 11/19/2012 MM / DD / YYYY	Case number 12-45770
			District		When	MM / DD / YYYY	Case number
10.	Are any bankruptcy	☑ No					
	cases pending or being filed by a spouse who is	TYes.	Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?		District		When	MM / DD / YYYY	Case number, if known
	urmuto.		Debtor				Relationship to you
			District		When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	No. Yes.	Go to I Has yo resider	ur landlord obtained an evicti	on judg	nment against you	and do you want to stay in your
				. Go to line 12.			
				s. Fill out <i>Initial Statement Ab</i> s bankruptcy petition.	out an	Eviction Judgment	Against You (Form 101A) and file it with

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LaToya Neal Case number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a **NEALS TAX OASIS** business you operate as an Name of business, if any individual, and is not a separate legal entity such as 564 GREGORY DRIVE UNIT 2C a corporation, partnership, or Number Street If you have more than one sole proprietorship, use a separate sheet and attach it 60139 **GLENDALE HEIGHTS** to this petition. State ZIP Code City Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it 13. Are you filing under can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if **Bankruptcy Code and** any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes, I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Part 4: 14. Do you own or have any ZI No property that poses or is Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? ____ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? PO BOX 6111 Street

City

11621 E MARGINAL WAY

ZiP Code

State

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Debtor 1

LaToya S Neal

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to	receive	a	briefing	about
credit counseling	b€	ecause o	of:	:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dahtand	LaTova	S	Neal	Casa pumbar //

Pá	art 6: Answer These Que	stions for Reporting Purposes	5		
16.	What kind of debts do you have?	16a. Are your debts primarily as "incurred by an individual			
	you have:	No. Go to line 16b. Yes. Go to line 17.			
	÷	16b. Are your debts primarily money for a business or investigation.			
		□ No. Go to line 16c.□ Yes. Go to line 17.			
		16c. State the type of debts you or	we that are not consumer o	febts or business d	ebts.
17.	Are you filing under Chapter 7?	☑ No. I am not filing under Chap	oter 7. Go to line 18.		
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter administrative expenses a	7. Do you estimate that afto are paid that funds will be a		
	excluded and	☐ No			
5	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes	makaman ya da wa wa sanga da maka ka ka ga da fi fantan ya ka fi fantan ya ka fi fantan ya ka fi fantan ya ka		
18.	How many creditors do	1 -49	1,000-5,000		25,001-50,000
	you estimate that you	50-99	5,001-10,000		50,001-100,000
a o Montaga	owe?	100-199 200-999	10,001-25,000		More than 100,000
19.	How much do you	2 \$0~\$50,000	31,000,001-\$10 millio	on 🔲	\$500,000,001-\$1 billion
	estimate your assets to	\$50,001-\$100,000	\$10,000,001-\$50 mil		\$1,000,000,001-\$10 billion
	be worth?	\$100,001-\$500,000	\$50,000,001-\$100 m		\$10,000,000,001-\$50 billion
37945055	en er stattet statet er gegen til gade het statet av det en en en statte historye ste dans verget, er ev en er	□ \$500,001-\$1 million	□ \$100,000,001-\$500 r	nillion $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	More than \$50 billion
	How much do you	\$0-\$50,000	\$1,000,001-\$10 millio		\$500,000,001-\$1 billion
	estimate your liabilities to be?	\$50,001-\$100,000	\$10,000,001-\$50 mill		\$1,000,000,001-\$10 billion
	to be;	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 m		\$10,000,000,001-\$50 billion
D۵	rt 7: Sign Below	■ \$500,001-\$1 million	□ \$100,000,001-\$500 r	million 🖵	More than \$50 billion
Га	Car. Sign Below				
Fo	r you	I have examined this petition, and I correct.	I declare under penalty of p	erjury that the infor	mation provided is true and
		If I have chosen to file under Chapt of title 11, United States Code. I un under Chapter 7.			
		If no attorney represents me and I this document, I have obtained and			
		I request relief in accordance with t	the chapter of title 11, Unite	ed States Code, sp€	ecified in this petition.
		I understand making a false statem with a bankruptcy case can result in 18 U.S.C. §§, 152, 1341, 1519, and	n fines up to \$250,000, or ii		
		* Joseph	<u>, , , , , , , , , , , , , , , , , , , </u>	c	
		Signature of Debtor T		Signature of Debt	for 2
		Executed on 09/24/2017	novAdagidanov	Executed on	***************************************
		MM / DD /YYY	'Y	MM	/ DD /YYYY

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	LaToya S First Name Middle Nam	Neal	Case number (if known)	
esente u are n atto	nttorney, if you are ed by one not represented rney, you do not e this page.	I, the attorney for the debtor(s) named in thi to proceed under Chapter 7, 11, 12, or 13 o available under each chapter for which the the notice required by 11 U.S.C. § 342(b) at knowledge after an inquiry that the informat	fititle 11, United States Code, and person is eligible. I also certify tha nd, in a case in which § 707(b)(4)(have explained the relief at I have delivered to the debtor(s) D) applies, certify that I have no
I (O III	e uns page.	×	Date	
		Signature of Attorney for Debtor	······································	MM / DD /YYYY
		Printed name		
		Firm name		
		Number Street		
		City	State	ZIP Code
		Contact phone	Email address	
		Bar number	State	

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Debtor 1

S LaToya Neal

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

	Are you aware that filing for bankruptcy is a serious action consequences?	on with long-te	rm financial and legal
	□ No □ Yes		
	Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprison	•	bankruptcy forms are
	□ No ☑ Yes		
	Did you pay or agree to pay someone who is not an atto No	rney to help yo	ou fill out your bankruptcy forms?
	Yes. Name of Person	aration, and Sig	Inature (Official Form 119).
	By signing here, I acknowledge that I understand the risk have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I or	at filing a banl	kruptcy case without an
X	: Harry x		
	Signature of Debtor	Signature of De	btor 2
	Date 09/24/2017 MM / DD / YYYY	Date	MM / DD / YYYY
	Contact phone	Contact phone	
	Cell phone	Cell phone	
	Email address	Email address	

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Fill in this i	nformation to i	dentify	your case:	
Debtor 1	LATOYA First Name	S	NEAL Middle Name	Last Name
Debtor 2 (Spouse, if filing			Middle Name	Last Name
		for the:	Northern District of I	
Case number	(If known)	·		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$8,350.00
1c. Copy line 63, Total of all property on Schedule A/B	\$8,350.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$5,605.00
Your total liabilities	\$16,505.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$0.00

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Debtor 1

LATOYA S NEAL DOcument

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Case number (# known)_______

Pa	rt 4: Answer These Questions for Administrative and Statistical Record	is	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	☐ No. You have nothing to report on this part of the form. Check this box and submit this ☐ Yes	form to the court with your other	er schedules.
7.	What kind of debt do you have?		e e contrar a transferencia de la contrar
	Your debts are primarily consumer debts. Consumer debts are those "incurred by a family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purp	n individual primarily for a persooses. 28 U.S.C. § 159.	onal,
	Your debts are not primarily consumer debts. You have nothing to report on this pa this form to the court with your other schedules.	rt of the form. Check this box a	nd submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$ 0.00
9. (Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:		man Amarika (1886) ka
		Total claim	
	From Part 4 on Schedule E/F, copy the following:		
;	∂a. Domestic support obligations (Copy line 6a.)	\$	
ţ	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
(9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
ę	9d. Student loans. (Copy line 6f.)	\$1,350.00	
9	Pe. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	
٤	ef. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	
g	g. Total. Add lines 9a through 9f.	\$1,350.00	

	dule A		roper	ty		12/15
Official	Form 106	6A/B				
						Check if this is an amended filing
United States	Bankruptcy Court for	orthe: No	orthern District	of Illinois		
Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Name		
Debtor 1	LATOYA First Name	S	NEAL Middle Name	Last Name		
Fill in this ir	nformation to id	entify yo	our case and t	his filing:		
	O430 11	01100	DOC 1	Document	Page 11 of 50	Desc Main

ges, write your name and case number (if known). Answer every question.

No. Go to Part 2. Yes. Where is the property?				
1. Street address, if available, or	other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule Dams Secured by Property. Current value of the portion you own?
City	State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		
County		☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	mmunity property
		Other information you wish to add about this it property identification number:		
ou own or have more than one 2. Street address, if available, or o		What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
Street address, if available, or o	other description	 □ Condominium or cooperative □ Manufactured or mobile home □ Land 	Current value of the entire property?	portion you own?
City	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	Check if this is co (see instructions)	mmunity property

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1.3	3. Street address, if availab	le, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule D:
	City	State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	(see instructions)	mmunity property
			II of your entries from Part 1, including any entries		\$
ou owr	own, lease, or have leg n that someone else drive s, vans, trucks, tractors	al or equitable intereses. If you lease a vehicle	st in any vehicles, whether they are registered or report it on Schedule G: Executory Contracts and motorcycles		;
4					
3.1.	Make: Model: Year: Approximate mileage: Other information: KBB VALUE	INFINITY FX35 2007 110000	Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securec Creditors Who Have Claim Current value of the entire property? \$ 7,000.00	I claims on Schedule D:
If you	u own or have more than	one, describe here:			
3.2.	Make: Model: Year:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clai the amount of any secured Creditors Who Have Claim Current value of the	claims on Schedule D: s Secured by Property. Current value of the
	Approximate mileage: Other information:		At least one of the debtors and another	entire property?	portion you own?
			Check if this is community property (see	Φ	\$

Case 17-31760 Doc 1 Filed 10/24/17 Entered 10/24/17 12:51:17 Desc Main LATOYA S NEAL Document Page 13 of 50 mber (# known)

3.3.	Make: Model: Year: Approximate mileage:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	Other information:	Check if this is community property (see instructions)	\$	\$
3.4.	Make: Model: Year: Approximate mileage:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	Other information:	Check if this is community property (see instructions)	\$	\$
4.1.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured class the amount of any securer Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D:
4.1.	Model:	Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
		Check if this is community property (see instructions)	\$	\$
If you 4.2.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
	Make:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?

5.

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Part 3: Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured class or exemptions.	aims
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
		rie.	
	☑ Yes. Describe FURNITURE	\$ 400.	.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	No No	1	
	Yes. Describe TV	\$ 300.	.00
^	Calleratibles of value	101-101-101-101-101-101-101-101-101-101	
8.	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		
	Yes. Describe	\$	
		Ψ	
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No	4	
	Yes. Describe	\$	
10.	Firearms		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	☑ No ☐ Yes. Describe		
	Yes. Describe	\$	
11.	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	□ No	*	
	2 Yes. Describe CLOTHING	\$500.	00
12	Jeweiry		
14.	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	☑ No		
	Yes. Describe	\$	
4.0)	
13.	Non-farm animals		
	Examples: Dogs, cats, birds, horses		
	No No		
	Yes. Describe	\$	
14.	Any other personal and household items you did not already list, including any health aids you did not list		
	☑ No		
	☐ Yes. Give specific	\$	
	information	Ψ	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$	
	for Part 3. Write that number here	Ψ	

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Part 4:

Describe Your Financial Assets

Do you own or have a	ny legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money ye	ou have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition	
☐ No			
2 Yes		Cash:	\$30.00
		unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each.	5,
2 Yes		Institution name:	
	17.1. Checking account:	53 BANK	\$ 120.00
	17.2. Checking account:		\$
	17.3. Savings account:		. \$
	17.4. Savings account:	***************************************	- \$
	17.5. Certificates of deposit:		- \$
	17.6. Other financial account:		\$
	17.7. Other financial account:		\$
	17.8. Other financial account:		
	17.9. Other financial account:		
	Institution or issuer name:	erage firms, money market accounts	_ \$ _ \$ _ \$
19. Non-publicly traded an LLC, partnership ☑ No ☑ Yes. Give specific information about them	n, and joint venture Name of entity:	rated and unincorporated businesses, including an interest in $$\%$$ of ownership: $\frac{0\%}{0\%} \frac{\%}{\%}$	\$ \$
			\$

20	D. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.			
	No No	ents are those you c	amor transfer to someone by signing or delivering them.	
	Yes. Give specific information about them	Issuer name:		\$
				\$
		***************************************		\$
21	Retirement or pension Examples: Interests in I		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☑ No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan	м	\$
		Pension plan:		\$
		IRA:		\$
		Retirement account:		\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
	Examples: Agreements companies, or others		made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	
	No No			
	☐ Yes	lr	nstitution name or individual:	
		Electric:		\$
		Gas:		\$
		Heating oil:		\$
		Security deposit on re	ental unit:	\$
		Prepaid rent:		\$
		Telephone:		\$
		Water:		\$
		Rented furniture:		\$
		Other:		\$
23.	Annuities (A contract for	r a periodic payment	of money to you, either for life or for a number of years)	
	☑ No			
	☐ Yes	Issuer name and des	scription:	
		***************************************		\$
		,,		\$
				¢

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	26 U.S.C. §§ 530(b)(1), 529A(b ☑ No		ount in a qualified ABLE program, or u(b)(1).	inder a qualified st	ate tuition program.	
	☐ Yes	Institution	name and description. Separately file the	records of any inter	ests.11 U.S.C. § 521((c):
						¢
						Φ
						\$
						\$
	Trusts, equitable or future intexercisable for your benefit	erests in p	property (other than anything listed in I	ine 1), and rights o	r powers	
	☑ No					
	Yes. Give specific information about them					\$
	Examples: Internet domain nam ✓ No.	rks, trade nes, websi	secrets, and other intellectual property es, proceeds from royalties and licensing	/ agreements		
	Yes. Give specific information about them					\$
	Licenses, franchises, and oth	er genera	-			
	Examples: Building permits, exc	clusive lice	nses, cooperative association holdings, lic	quor licenses, profes	sional licenses	
	□ No				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Yes. Give specific information about them					\$
Moi	ney or property owed to you?		:			Current value of the portion you own? Do not deduct secured claims or exemptions.
28 7	Fax refunds owed to you					
	No					
	Yes. Give specific information	าก		:		•
	about them, including v				Federal:	\$
	you already filed the re and the tax years				State:	\$
	and the tax years				Local:	\$
1	Family support Examples: Past due or lump sur ☑ No	m alimony,	spousal support, child support, maintena	nce, divorce settlem	ent, property settleme	ent
	☑ Yes. Give specific informatio	n.				
	Tes. Give specific information	ZI I			Alimony:	\$
					Maintenance:	\$
				-	Support:	\$
					Divorce settlement:	\$
					Property settlement:	\$
30. (Other amounts someone owe Examples: Unpaid wages, disab Social Security bene	oility insura	nce payments, disability benefits, sick pay I loans you made to someone else	y, vacation pay, wor	kers' compensation,	
ſ	✓ No	, =, pun	•			
	Yes. Give specific information	on				
	, so. out openio informatio					\$
					y= ,,, , , = , ,	

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Debtor 1	First Name Middle Name	AL Document Last Name	Page 18 🕬 🗗 (if known)	
	ts in insurance policies		A) Pilling and a second a second and a second a second and a second a second and a second and a second and a	
•	les: Health, disability, or life insurar	ice; health savings account (HS	A); credit, homeowner's, or renter's insurance	
☑ No □ vee	s. Name the insurance company	_		
 163	of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				<u> </u>
				\$
32. Any int	terest in property that is due you	from someone who has died		
If you a			rance policy, or are currently entitled to receive	
No		Service Mandre Mandre Mandre Control of the Control		
☐ Yes	. Give specific information			\$
33. Claims	against third parties, whether or			**************************************
Exampl	les: Accidents, employment dispute	s, insurance claims, or rights to	sue	
⊿ No				
☐ Yes	. Describe each claim.			\$
24 Other e	antingant and unliquidated claim		counterclaims of the debtor and rights	
	off claims	is of every flature, including t	ounterclaims of the debtor and rights	
No		magna y panganga yangga, ay pangan inga pa yangan inamunin inamunin inamunin inamunin inamun inamun inagan bahan		materia comp
Yes	. Describe each claim			\$
				Ψ
05 A 6:		114		
	ancial assets you did not already			
☑ No				
☐ Yes	. Give specific information			\$
	e dollar value of all of your entrie t 4. Write that number here	s from Part 4, including any e	ntries for pages you have attached	s
103 1 211	4. Wife that humber here		-	
Part 5:	Describe Any Business I	Palatad Branarty Val. C	wn or Have an Interest In. List any	raal actata in Part 1
rait 5.	Describe Any Business-	telated Property Tou C	will of have all interest in. List any	real estate in Fart 1.
37. Do you	own or have any legal or equitab	le interest in any business-re	lated property?	
No.	Go to Part 6.			
Yes	. Go to line 38.			
				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
38. Accoun	ts receivable or commissions yo	u already earned		
□ No				
	. Describe			na akun
	(MOMINIO COMPANIO CO	\$44.44.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.		\$
39. Office e	equipment, furnishings, and supp	olies		

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Yes. Describe......

☐ No

Debtor 1 LATOYA	7-31760 Doc 1 Filed 10/24/17 Entered 10/24/1 S NEAL Document Page 19 of 50 unbe		Desc Main
riistivanie	movie Haing Last Matric		
40. Machinery, fixtures, e	quipment, supplies you use in business, and tools of your trade		
☐ No		and a serious fundamental and from the summaries are summaries and the serious fundamental serious for the serious fundamental	nemating.
Yes. Describe			\$
			~ ¹
41. Inventory			
Yes. Describe		et letter ett ett ett ett ett ett ett ett et	\$
42 Interests in partnersh	ps or joint ventures		
O No			
Yes. Describe	Name of entity:	% of ownership:	
			\$
		% %	\$ \$
		***************************************	*
43. Customer lists, mailin No	g lists, or other compilations		
	include personally identifiable information (as defined in 11 U.S.C. § 101(4	1A)) ?	
☐ No			
🔲 Yes. Desci	ibe		\$
44. Any business-related	property you did not already list		
Yes. Give specific			¢.
information			\$
			φ
		14	3
			\$
			\$
45 Add the deller veice of	fall of very nation from Doub F instead in a second in the	-411	
	fall of your entries from Part 5, including any entries for pages you have umber here		\$
Part 6: Describe An If you own or	y Farm- and Commercial Fishing-Related Property You Own or I have an interest in farmland, list it in Part 1.	lave an Interest In	1.
46. Do you own or have an Mo. Go to Part 7.	y legal or equitable interest in any farm- or commercial fishing-related pr	operty?	
Yes. Go to line 47.			
			Current value of the
			portion you own? Do not deduct secured claims
47. Farm animals			or exemptions.
Examples: Livestock, po	ultry, farm-raised fish		
□ No			

☐ Yes.....

Debtor 1					Entered 10/24/17 12:51:17 Page 20 Ofa 5. Qumber (if known)	Desc Main
	First Name	Middle Name	Last Name	•	-	
° Crons	aithar arawina	ar hansaat	ام م			

48. Crops—either growing or harvested					
☐ No ☐ Yes. Give specific information				\$	
49 Farm and fishing equipment, implements, machinery, fixtur ☐ No ☐ Yes					
☐ Yes	en en samme per santago, pe papa (se se son constitución se	Post till sommitte ommitte ommitteljamantilla myje saj		\$	
50. Farm and fishing supplies, chemicals, and feed No Yes	19 ⁸ 11 ² 111 111 111 111 111 111 111 111 111 11			1.00 M 11.0	
				\$	
51. Any farm- and commercial fishing-related property you did	-				
Yes. Give specific information				\$	
52. Add the dollar value of all of your entries from Part 6, include for Part 6. Write that number here	~ .		· •	\$	
Part 7: Describe All Property You Own or Have	an Inter	est in That	You Did Not List Above		
53. Do you have other property of any kind you did not already Examples: Season tickets, country club membership					
☑ No				•	
Yes, Give specific information				э <u></u>	
				\$	
54. Add the dollar value of all of your entries from Part 7. Write t	that numbe	r here	→	\$	
Part 8: List the Totals of Each Part of this Form	1				
55. Part 1: Total real estate, line 2			→	\$	
56. Part 2: Total vehicles, line 5	\$	7,000.00			
57. Part 3: Total personal and household items, line 15	\$	1,350.00			
58. Part 4: Total financial assets, line 36	\$				
9. Part 5: Total business-related property, line 45	\$				
60. Part 6: Total farm- and fishing-related property, line 52	\$				
11. Part 7: Total other property not listed, line 54	+\$				
2. Total personal property. Add lines 56 through 61	. \$	8,350.00	Copy personal property total 👈	+ ¢	8,350.00
22. Total personal property, Add lines so through on	:		copy percental property total 2	- Ψ	

	,	Case	; 17-3	17700	ו סטט נ	. Fileu 10 Dociii		Page 21 0	10/24/1/ 12.; f	ΣΙ.Ι	Desc Mail	1
Fil	l in this in	ıforma	tion to i	dentify	your case:		IIPIII	Page 21 0	1 50			
De	btor 1	LAT		S	NEAL							
De	btor 2	First Nar	ne		Middle Name		Last Name					
	ouse, if filing)				Middle Name		Last Name					
_		Bankrup	tcy Court	for the:	Northern Dist	rict of Illinois						
	se number known)											ck if this is ar
											ane	nded filing
Off	ficial F	orm	106	С								
Sc	ched	ule	C:	_ Th	e Pro	perty '	You	Claim a	s Exem	nf		
												04/16
usin(spac	g tne prope	erty you d, fill o	ut and at	in <i>Sche</i> tach to	dule A/B: Pro this page as	perty (Official I	Form 106A	/B) as your source	qually responsible f e, list the property to necessary. On the t	hat vou clair	m as exempt if	more
spec of an retire imits would	offic dollar by application ement funds the exent d be limited	amoul ble sta ds—m option ed to th	nt as ex tutory li ay be ur to a par ne appli	empt. / mit. So nlimited ticular cable s	Alternatively, ome exempti d in dollar an dollar amou datutory amo	, you may clair ons—such as nount. Howeve nt and the val ount.	n the full those for er, if you d ue of the p	fair market value health aids, right :laim an exemptic	mption you claim. of the property be ts to receive certai on of 100% of fair nined to exceed th	eing exemp in benefits, market val	oted up to the a and tax-exemp	nmount pt that
rai	CH IO	entity	tne Pr	operty	/ You Clain	ı as Exempt						
								your spouse is filin				
	☐ You an	e claim	ing state	and fe	deral nonban	kruptcy exemp J.S.C. § 522(b)	tions. 11 L	J.S.C. § 522(b)(3)				
•	······································	o Gain	ing lede	iai exei	npuons, ii c	7.5.C, 9 522(D)I	.2)					
2. F	or any pr	operty	you list	on Sc	hedule A/B t	hat you claim	as exemp	t, fill in the inforn	nation below.			
	Brief desc	ription	of the p	roperty	and line on	Current value	of the	Amount of the ev	ramanélan sasa alali-	0		
	Schedule	A/B tha	it lists th	is prop	erty	portion you o	wn	Amount of the ex	emption you claim		c laws that allow	w exemption
	**. 1			-1-11		Copy the value Schedule A/B	e from	Check only one bo	ox for each exemption	n.		
	3rief		53 BAN	IK CH	IECKIN_	s 120.00		⊿ \$ 120.00		735 II	.CS 5/12-100	VR)
	lescription .ine from	,			<u> </u>	\$ 120.00			narket value, up to	10012	.00 0/12-100	,(D)
3	Schedule A	VB:	<u> </u>					any applicable	e statutory limit			
	Brief lescription:	. <u>.</u>	HOUSE	E GOO	DDS	\$ 400.00		☑ \$ 400.00		735 IL	CS 5/12-100)(B)
Ł	ine from	e	<u>i-7</u>			***************************************		☐ 100% of fair m	narket value, up to			(-)
	Schedule A	VB: →						any applicable	statutory limit			
	Brief escription:		NOTUN	10BIL	<u>E</u>	\$ <u>7,400.00</u>		10,900.0 0		735 IL	CS 5/12-100	(B)
	ine from Schedule A	/B: _3	.1						narket value, up to e statutory limit			
									·			
						more than \$10 rears after that		filed on or after the	e date of adjustmen	†		
Z	No									··)		
L	Yes. Did Va No	you a	quire th	e prope	erty covered b	y the exemptio	n within 1,3	215 days before y	ou filed this case?			
	Yes	3										

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	Document Page 22 of 50			
Fill in this information to identify your cas	e:			
Debtor 1 LATOYA S NEAL First Name Middle N	ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N				
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number (if known)			□ Checi	if this is an
(II M DWH)				ded filing
				-
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Prop	perty	12/15
information. If more space is needed, copy additional pages, write your name and cas 1. Do any creditors have claims secured b	y your property?	and attach it to this	form. On the top o	
	n to the court with your other schedules. You have nothi	ng else to report on t	his form.	
tes. Fin it an of the information below.				
Part 1: List All Secured Claims				
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
SOUTHERN AUTO FINANCE Creditor's Name	Describe the property that secures the claim:	\$ 10,900.00	\$7,000.00	\$
SAFCO Number Street	AUTO LOAN 2007 INFINITI FX35			
6700 N. Andrews Avenue # 500	As of the date you file, the claim is: Check all that apply.	≟		
Fort Lauderdale FL 33309 City State ZIP Code	Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☑ Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)			
Check if this claim relates to a community debt	· • • • • • • • • • • • • • • • • • • •	•		
Date debt was incurred 02/14/2014	Last 4 digits of account number 8 2 8 6			
2.2	Describe the property that secures the claim:	\$	TO THE STATE OF TH	\$
Creditor's Name				
Number Street				
3,03,	As of the date you file, the claim is: Check all that apply.	į		
444-44-44-44-44-44-44-44-44-44-44-44-44	Contingent			
City State ZIP Code	Unfiguidated			
,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	gyrdyn o chfardlog y beillywell o gylyndigog gylyndigol y gynnad o beil o chan a chan a chan a chan a chan a c	etimis (4 likistassi kasisassi, esisediye), etimisi (5, etimoo) =
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	s <u>10,900.00</u>		· · · · · · · · · · · · · · · · · · ·

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Document Page 23 of 50 Fill in this information to identify your case: LATOYA NEAL Debtor 1 Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (if known) Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? **∡** No Yes. Name of person_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Deptor Signature of Debtor 2

Date 09/24/2017 MM / DD / YYYY

Date MM / DD / YYYY

		Case 17-	31760	Doc 1	Filed 10/24/17	Entered 10/24/17 1	2:51:17	Desc Ma	in
	Fill in this in	nformation to	identify y	our case:		4 of 50			
	Debtor 1	LATOYA	S	NEAL					
İ		First Name		Middle Name	Last Name				
	Debtor 2 (Spouse, if filing	First Name		Middle Name	Last Name				
	United States	Bankruptcy Cour	t for the: N	orthern Distric	t of Illinois				
	Case number								eck if this is an
L	(If known)							ame	ended filing
C	Official f	Form 106	SE/F						
S	iched	ule E/F:	Cred	ditors \	Nho Have U	nsecured Clair	ns		12/15
-						RIORITY claims and Part 2 for		+h NONDRIOR	
						could result in a claim. Also li			
						tracts and Unexpired Leases (litors Who Have Claims Secu			
						s on the left. Attach the Conti			
ar	ny additiona	I pages, write	your nam	ne and case n	umber (if known).				
P	art 1: Li	st All of You	r PRIOR	ITY Unsecu	red Claims				
1.	Do any cr	editors have p	riority un	secured clain	ns against you?				
	No. Go	to Part 2.							
^	Yes.			dalaima Kad	eroditor has more than an	a majanja, , , , , , , , , , , , , , , , , , ,	·		de elejon Fen
2.						e priority unsecured claim, list t and nonpriority amounts, list the			
	nonpriority	amounts. As m	nuch as po	ssible, list the	claims in alphabetical or	der according to the creditor's n	ame. If you ha	ave more than t	wo priority
				-		creditor holds a particular clain in the instruction booklet.)	i, list the othe	r creditors in Pa	art 3.
	(r or arr ex	Jianulion of Cat	sir type or	cianii, see nie	menucione for the form	in the instruction bookiet.)	Total claim	Priority	Nonpriority
	_							amount	amount
2.1					Last 4 digits of accou	int number	\$	\$	\$
	Priority Cred	itor's Name			_		<u> </u>		<u> </u>
	Number	Street			When was the debt in	ncurred?			
					As of the date you file	e, the claim is: Check all that apply	•		
	City		State	ZIP Code	Contingent				
		rred the debt?			Unliquidated				
	Debtor		Check one.		Disputed				
	Debtor				Type of PRIORITY us	nsecured claim:			
		1 and Debtor 2 of the debtor	-	thar	Domestic support ob				
		if this claim is				ther debts you owe the government			
		m subject to of		munity dobt	Claims for death or printoxicated	personal injury while you were			
	☐ No	iii sabject to vi	iiset:		Other. Specify				
	_ ☐ Yes		**************************************	i erlenerk vil stologe i kestalar kes sakir serlik masaki senger	To the efficiency of the graph of the entire of the efficiency of the efficiency of the entire of th		d institute definition facilities de l'élémente étamps about	umiliado anticanda A landigo () y nigoril y la fugicia (la popularizada)	antikensinantikenin onimannon komunen kenoman ana diaren ersika are-
2.2	J				Last 4 digits of accou	nt number	\$	\$	\$
	Priority Cred	tor's name			When was the debt in				
	Number	Street			As of the date you file	e, the claim is: Check all that apply			
					Contingent	, the diam is. Oncor an that apply			
	City		State	ZIP Code	Unliquidated				
		rred the debt?	Check one.		☐ Disputed				
	Debtor	•			Type of PRIORITY ur	nsecured claim:			
	Debtor	2 only 1 and Debtor 2 o	nlv		Domestic support ob	ligations			
		one of the debto	-	ther		her debts you owe the government			
	_	if this claim is			Claims for death or p	personal injury while you were			
		m subject to of	fset?						
	☐ No	-							
	Yes								

First Name Middle Name Last Name Document Page 25 of 50 Page 151:17 Desc Main

r PRIORITY Unsecured Claims — Continuation Page

listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?	,			
□ No				
2 Yes			eg vande generalend et schools die April (1985), bit werden fan	
	Last 4 digits of account number	\$_7,000.00	\$	\$
Priority Creditor's Name				
lumber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
•	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	 Claims for death or personal injury while you were intoxicated 			
Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
☐ No				
Yes weleteleteleteleteleteleteleteleteletele				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
,	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify	non-verstend-nd the hotelectrical distinct block	-stratulalar lündük som Karsin Klöresk 2011 av dest 220	and the state of t
s the claim subject to offset?	Outer. Opening			
No				
☐ Yes				

First Name Middle Name Last Name Document Page 26 of 50

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Dana 26 of Shumber	(if known)	

7		2.
2.	44	

List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority ur No. You have nothing to report in the Yes						
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one cre claims fill out the Continuation Page of	ditor separaditor holds	ately for each clair	n. For each claim listed, identify wh	at type of claim it is. Do not	list clai	ms already
	claims in out the community rage of	rail Z.				Tota	l claim
4.1	COMED			Last 4 digits of account number	8 2 8 6		750.00
	Nonpriority Creditor's Name			When was the debt incurred?	05/01/2015	\$	7 30.00
	PO BOX 6111			when was the debt incurred?	00/01/2010		
	Number Street CAROL STREAM	IL	60197				
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	•			Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	☑ Debtor 1 only			☐ Disputed			
	Debtor 2 only			·			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ured claim:		
	At least one of the debtors and another			☐ Student loans			
	☐ Check if this claim is for a commu	nitv debt		Obligations arising out of a separate			
				that you did not report as priority			
	Is the claim subject to offset? I No			Debts to pension or profit-sharing Other. Specify UTILITY	g pians, and other similar debts	i	
	Yes			Curer, opeciny			
		in en französische er zu sahrt. Er dizzieller er Grand			8 2 8 6	***********	525.00
4.2	XFINITY COMCAST			Last 4 digits of account number	8 2 8 6 05/01/2015	\$	020.00
	Nonpriority Creditor's Name			When was the debt incurred?	00/01/2010		
	11621 E MARGINAL WAY Number Street						
	SEATTLE	WA	98168	As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			Student loans			
	Check if this claim is for a commu	nity deht		Obligations arising out of a separ			
		,		that you did not report as priority Debts to pension or profit-sharing			
	Is the claim subject to offset? ☑ No			Other, Specify UTILITY	y plane, and outer ourman doors		
	Yes			•			
	ddaedddianathethafoedoed Areirod Areir	anan ang maganang na dagais					
4.3	GREAT LAKES CREDIT UNIC	DN		Last 4 digits of account number		\$	1,350.00
	Nonpriority Creditor's Name P.O. Box 1289			When was the debt incurred?	08/01/2009		
	Number Street		······································				
	Bannockburn	IL	60015	A	in Charle all that anniv		
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	Who incurred the debt? Check one.			Contingent			
	Debtor 1 only			Unliquidated			
	Debtor 2 only			☐ Disputed			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			Student loans			
	☐ Check if this claim is for a commu	nity debt		Obligations arising out of a separ	ation agreement or divorce		:
	Is the claim subject to offset?			that you did not report as priority	claims		\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.
	M No			Debts to pension or profit-sharing	• •		
	Yes			Other. Specify			

First Name Middle Name Last Name Document Page 27 of 50 mber (if Known) Desc Main

Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this page,	number th	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total cla
ILLINOIS DEPT EMPLOYMI	ENT SEC	URITY	Last 4 digits of account number 8 2 8 6	s 300
Nonpriority Creditor's Name			When was the debt incurred? 05/01/2013	
900 South Spring St			when was the debt incurred?	
Number Street SPRINGFLELD	IL	62707	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
☐ At least one of the debtors and anoth	er		 Student loans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a comm	unity debt		you did not report as priority claims	
	idility debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No			Other. Specify_LOAN	
Yes				
VERIZON WIRELESS	446EIIISEA A MAMELIAN SANIAN AM	ang	Last 4 digits of account number 8 2 8 6	\$280
Nonpriority Creditor's Name			When was the debt incurred? 06/01/2016	
500 Technology Drive Suite	550		-	
Weldon Spring	MO	63304	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and another	er		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a comm	unity debt		you did not report as priority claims	
Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
☑ No ☐ Yes			Cite. Specify	
PND DEALTY / UNION LI	erine in de de la filosofie de	anada e la la comunicación de la c	Last 4 digits of account number 8 2 8 6	\$ <u>2,400</u>
ENR REALTY / HUGO LI Nonpriority Creditor's Name			00/04/0047	
2036 Glen Ellyn Rd,			When was the debt incurred? $\frac{06/01/2017}{}$	
Number Street	11	00400	As of the date you file, the claim is: Check all that apply.	
GLENDALE HEIGHTS	IL State	60139 ZIP Code	Contingent	
~1		5000	Unliquidated	
Who incurred the debt? Check one.			Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	er .		Student loans	
_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☑ No			Other. Specify RENTAL PROPERTY	

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	•
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Aerine	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Maria	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
valle:	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Vame	On which entry in Part 1 or Part 2 did you list the original creditor?
101116	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$	0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$	1,350.00
	g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims		\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$	4,255.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	5,605.00

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Fill in this i	nformation to	identify	your o	case:			
Debtor	LATOYA	S	NEA	L	·		
Debtor 2	First Name		Mid	dle Name	Last Name		
(Spouse If filing) First Name		Mid	die Name	Last Name		
United States	Bankruptcy Cou	rt for the:	Northe	m District of Illinois			
Case number (If known)							Check if this is an amended filing
Official	Form 10	6G					
Sched	ule G: l	Exec	cuto	ory Contr	acts and	Unexpired Lease	PS 12/15
information. additional pa	If more space ges, write yοι	is need Ir name	led, cop and ca	by the additional passe number (if kno	page, fill it out, nu wn).	gether, both are equally responsib mber the entries, and attach it to t	
☐ No. 0	Check this box	and file t	this forr		h your other sched	ules. You have nothing else to report	
	, rent, vehicle					act or lease. Then state what each in the instruction booklet for more e.	
Person	or company w	ith who	m you	have the contract	or lease	State what the contract or	lease is for
2.1 ENR F	REALTY					UNFURNISHED APARTME	ENT LEASE
Name 2036 (Glen Ellyn R	d				LEASE CURRENTLY MON	TH TO MONTH
Number	Street	************************		00400			
City	DALE HEIG		State	60139 ZIP Code			
2.2	ta peta en la comercia en enclara la comedica escapera desidence.	zetuniski zestenbetski si s	renta da este arrada.	t i The was tressenter eine rine receive the entire in each wind with a section of the security of the section	elindijas ames lisemes serijminina in dimalasinginalisega en far	ત્ર કું માટે ત્યાં માટે આવેલા કરે તેમાં આવેલા કરે આ માટે અને અને આવેલા કર્યા અને આવેલા કરે છે. આ પણ કરે કરી અન ત્યાં માટે આ માટે અને અને સામાન માટે આ માટે આ માટે અને અને અને અને અને અને અને અને અને સામાન કરી અને અને સામાન	ratiotika ritan kintika mendukular serira alest kan enera stanti amensik desirkit ili kuda dan alamada samula stima atikkan
Name							
Number	Street						
City	entheteritalism hamilten ereitsperitalism ereitsperitalism	Appeller de l'antich production	State	ZIP Code		r story and of surface and the time of parts of commission as also and techniques a surface a different parts of a surface and and a distribution of a surface and a surfa	dopodast halv, with 18 febreal Spenderman hall be sin the Sandard over 1 a Sopran and also an assembly the febreal feb
2.3							
Name							
Number	Street						
City	Selvedonis editoris Albreito Albreito (Albreito Albreito Albreito Albreito Albreito Albreito Albreito Albreito	alestein valentein krimetei	State	ZIP Code		ત્ર તમામ ભાગમાં ભાગમાં ભાગમાં આવેલા છે. તેમ ભાગમાં માટે તમાં આવેલા માટે માટે ભાગમાં અંભો આવત પ્રત્યો હતા છે. આ ત્રા તમામ ભાગમાં આવેલા માટે આવેલા માટે તમા માટે આવેલા માટે આવેલા માટે આવેલા માટે આવેલા માટે આવેલા છે. આ પ્રત્યો	ર્શના કરવાના માના કર્યા કરવાના કર્યા કરવાના માતા કરવાના માતા કરવાના માતા કરવાના માતા કરવાના માતા કરવાના માતા ક માતા કરવાના માતા કર્યા કરવાના માતા કરવ
2.4		······································					
Name							
Number	Street						
City		District Control of the Control	State	ZIP Code		T PROSPONIENNAMEN DE TERRETORIE, DE PERSONAL DE PROSPONIEN PROPRETORIEN PROGRAMMENT PROGRAMMENT PROGRAMMENT DE	u contago ao amin'ny mandrona amin'ny fivoa amin'ny fivoa amin'ny faritana any ao a
2.5							
Name							
Number	Street	······································	······································	ertertus anticomo de la como de l	***************************************		
City		\$	State	ZIP Code			

Case 17-31760 Doc 1 Filed 10/24/17 Entered 10/24/17 12:51:17 Desc Main Document Page 31 of 50 Fill in this information to identify your case: .ATOYA Debtor 1 Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out. and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ☑ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? ______. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Schedule D, line ☐ Schedule E/F, line ____ Number ☐ Schedule G, line ____ City 3.2 ☐ Schedule D, line ___ Name Schedule E/F, line Number Street Schedule G, line City State 3.3 Schedule D, line Name ☐ Schedule E/F, line Number Street Schedule G, line City State

Fill in this in	iformation to ic	lentify y	our case:					
Debtor 1	LATOYA	S	NEAL					
Debtor 2	First Name		Middle Name	Last Name				
(Spouse, if filing)		fartha: N	Middle Name orthern District of Illinoi	Last Name				
Case number			DIGITE IN DISERCE OF HEIRO			Check i	f this is:	
(If known)				*			mended filing	
	A supplement showing postpetition chapter income as of the following date:							
Official Fo	orm 106I						DD / YYYY	date.
Sched	lule I: `	You	r Income					12/15
supplying cor if you are sep separate shee	rect informatio arated and you	on. If you or spous On the to	are married and not e is not filing with you op of any additional p	filing jointly, and y u, do not include ir	our sp	oouse is living with	otor 2), both are equally n you, include informati pouse. If more space is f known). Answer every	on about your spouse. needed, attach a
Fill in your informatio	r employment			Debtor 1			Debtor 2 or non-	filina spouse
If you have attach a se	more than one parate page with about additional	ĥ,	Employment status	☐ Employed ☑ Not employ	yed	indicated and an indicated and indicated and an indicated and an indicated and indicated an indicated an indicated and indicated an indicated an indicated an indicated and indicated an indicated an indicated and indicated and indicated an indicated and indicated and indicated and indicated and indicated and indicated and indicated an indicated and indicated an indicated and indicated and indicated and indicated and indicated an indicated and indicated an indicated and indicat	Employed Not employed	i Christophil tan dallina educul Andrea educul anno educul
Include par self-employ	t-time, seasonal	l, or					, -	
Occupation	may include stuker, if it applies.	udent	Occupation					
		E	imployer's name	***************************************				
		E	imployer's address	Number Street			Number Street	
						·····		
				City	Stat	te ZIP Code	City	State ZIP Code
		H	low long employed th	ere?	-		And \$4.44 - 100 -	
Part 2:	Give Details A	About M	onthly Income					
spouse unle	ess you are sepa	arated.					vrite \$0 in the space. Incl	-
			more than one employ th a separate sheet to		ormatio	on for all employers	for that person on the lin	es
						For Debtor 1	For Debtor 2 or non-filing spouse	s
			, and commissions (blue control culate what the month		2.	\$0.00	\$	
3. Estimate a	and list monthly	y overtin	ne pay.		3.	+\$0.00	+ \$	_
4. Calculate	gross income.	Add line	2 + line 3.		4.	\$0.00	\$	

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Debtor 1

LATOYA S Document

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Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans 5d. 5e Insurance 5e 5f. Domestic support obligations 5f. 5a. Union dues 5g. 5h. Other deductions. Specify: 5h. 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 1,680.00 8d. Unemployment compensation 8d. 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: _ 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 1,680.00 9. 10. Calculate monthly income. Add line 7 + line 9. 1.680.00 1,680.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. 🛨 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,680.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ☐ No. EXPECT TO REGAIN EMPLOYMENT Yes. Explain:

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Fill in this information to identi	fy your case:						
Debtor 1 LATOYA S	NEAL	Oh a tarrita					
First Name Debtor 2	Middle Name Last Name	Check if this					
(Spouse, if filling) First Name	Middle Name Lasi Name	An amen					
United States Bankruptcy Court for the	United States Bankruptcy Court for the: Northern District of Illinois			A supplement showing postpetition chapter 13 expenses as of the following date:			
Case number (If known)		MM / DD /		•			
Official Form 106J							
Schedule J: Yo	- ur Fynansas						
Be as complete and accurate as p	possible. If two married people are fili ded, attach another sheet to this form n.	ing together, both are equally res n. On the top of any additional pag	ponsible for supply ges, write your nam	12/15 ring correct se and case number			
1. Is this a joint case?							
☑ No. Go to line 2.							
Yes. Does Debtor 2 live in a	separate household?						
☐ No ☐ Yes. Debtor 2 must f	ile Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.					
2. Do you have dependents?	□ No	a akkalanda kalanda a mara maranga mengalang akkalang manana mengalang akkalang at mengalang akkalang akkalang					
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?			
Do not state the dependents' names.	,	Son	12	☐ No ☑ Yes			
		Daughter _	3	☐ No ☑ Yes			
		400000000000000000000000000000000000000	Marie Ma	□ No			
				Yes			
		***	-	U No □ Yes			
				□ No			
				Yes			
3. Do your expenses include	□ No						
expenses of people other than yourself and your dependents?	Yes						
Part 2: Estimate Your Ongo	ing Monthly Expenses	\$ 44.4 M					
Estimate your expenses as of your	bankruptcy filing date unless you ar kruptcy is filed. If this is a suppleme	e using this form as a supplemen ntal Schedule J, check the box at	t in a Chapter 13 ca the top of the form	ase to report and fill in the			
	n-cash government assistance if you						
	it on Schedule I: Your Income (Offic	•	Your expen	ISOS			
 The rental or home ownership any rent for the ground or lot. 	expenses for your residence. Include f		4. \$				
If not included in line 4:							
4a. Real estate taxes		•	4a. \$	0.00			
4b. Property, homeowner's, or re		•	4b. \$	0.00			
4c. Home maintenance, repair, a		•	4c. \$	0.00			
4d. Homeowner's association or condominium dues			4d. \$	0.00			

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Debtor 1

LATOYA S NEAL

Case number (if known)_____

Your expenses 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. 6. Utilities: Electricity, heat, natural gas 80.00 6a. 6a 6b. Water, sewer, garbage collection 50.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services 150.00 6c 0.00 Other, Specify: 6d. 6d. 150.00 Food and housekeeping supplies 7. 0.00 Childcare and children's education costs 8. 100.00 Clothing, laundry, and dry cleaning 9. Personal care products and services 100.00 10 10. 0.00 Medical and dental expenses 11. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12 Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations 0.00 14 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 0.00 15a. Life insurance 15a. 0.00 15b. Health insurance 15b. 77.00 15c. Vehicle insurance 15c. 0.00 15d. Other insurance. Specify: 15d Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 Specify: 16 17. Installment or lease payments: 0.00 17a. Car payments for Vehicle 1 17a. 0.00 17b. Car payments for Vehicle 2 17b. 0.00 17c. Other. Specify:_ \$ 17c 0.00 17d. Other. Specify:___ 17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify:_ Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 0.00 20a. Mortgages on other property 20a. 0.00 20b. Real estate taxes 20b. 0.00 20c. Property, homeowner's, or renter's insurance 20c. 0.00 20d. Maintenance, repair, and upkeep expenses 20d. 0.00 20e. Homeowner's association or condominium dues 20e.

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Debtor 1	LATOYA S NEAL First Name Middle Name Last Name Case number	BF (if known)	·	
21. Other.	Specify:	21.	+\$	
22. Calcul	ate your monthly expenses.		***************************************	:
22a. A	ld lines 4 through 21.	22a.	\$	1,397.00
22b. C	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22c. Ad	d line 22a and 22b. The result is your monthly expenses.	22c.	\$	1,397.00
23. Cafcula	e your monthly net income.			
23a. C	py line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,680.00
23b. C	ppy your monthly expenses from line 22c above.	23b.	- \$	1,397.00
	btract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .	23c.	\$	283.00
24. Do you	expect an increase or decrease in your expenses within the year after you file this form	?		
	nple, do you expect to finish paying for your car loan within the year or do you expect your apparent to increase or decrease because of a modification to the terms of your mortgage?			
☑ No. ☐ Yes.	Explain here: I ONLY EXPECT TO INCREASE INCOME ONCE I BECOM	E EMPLO	YED	

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Fill in this information to identify your case:			
Debtor 1 LATOYA S NEAL			
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of			
Case number (If known)			Check if this is an
			amended filing
Official Form 107			
Statement of Financial Affai	rs for Indiv	iduals Filing for Bankrupt	Cy 04/10
e as complete and accurate as possible. If two mar formation. If more space is needed, attach a sepai			
mormation. If more space is needed, attach a sepai umber (if known). Answer every question.	ate sneet to this for	m. On the top of any additional pages, write you	r name and case
Part 1: Give Details About Your Marital Sta	atus and Where Y	ou Lived Before	
What is your current marital status?			
☐ Married			
☐ Not married			
 During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 			
Debtor 1:	Dates Debtor 1	Debtor 2:	Dates Debtor 2 lived there
		☐ Same as Debtor 1	Same as Debtor 1
203 Regency Drive			
Number Street	From To	Number Street	From To
unit 125			
Bloomingdale IL 60108			
City State ZIP Code		City State ZIP Code	
		Same as Debtor 1	Same as Debtor 1
Number Street	From	Number Street	From
Number Sueer	То	Number Street	То
	u.		_
City State ZIP Code		City State ZIP Code	was de-
 Within the last 8 years, did you ever live with a s states and territories include Arizona, California, Ida 			
□ No			
Yes. Make sure you fill out Schedule H: Your Co	odebtors (Official For	n 106H).	
Part 2: Explain the Sources of Your Income			

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Debtor			Case nu	ımber (if known)	
	First Name Middle Name Las	at Name			
	Did you have any income from employme	_		•	endar years?
	you are filing a joint case and you have inc		- · · · · · · · · · · · · · · · · · · ·		
	☑ No ☑ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	₩ages, commissions, bonuses, tips Operating a business	\$17,120.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year:	✓ Wages, commissions, bonuses, tips	s 14,082.00	☐ Wages, commissions, bonuses, tips	\$
	(January 1 to December 31, 2016 YYYY	Operating a business	7	Operating a business	
	For the calendar year before that:	Wages, commissions, bonuses, tips	s 14,819.00	Wages, commissions, bonuses, tips	•
	(January 1 to December 31, 2015 YYYY	Operating a business	<u> </u>	Operating a business	Ψ
ln ur	id you receive any other income during to a clude income regardless of whether that income remployment, and other public benefit paymambling and lottery winnings. If you are filing	come is taxable. Examples nents; pensions; rental inco	of other income are alim ome; interest; dividends;	money collected from laws	suits; royalties; and
Li	st each source and the gross income from	each source separately. Do	o not include income that	you listed in line 4.	
	No Yes. Fill in the details.	State and the state we shall be also conjugate that may be under an income on a pro-			
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until	DOVENMUEHLE	\$ 15,860.00		\$
	the date you filed for bankruptcy:	IDES	\$1,260.00		\$
			\$		\$
	For last calendar year:	DOVENMUEHLE	\$10,953.00		\$

(January 1 to December 31,2016)

For the calendar year before that:

(January 1 to December 31,2015)

3,129.00

1,875.00

12,944.00

NEALS TAX OAS \$____

ARC

NEALSTAXOASI

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Debtor 1

LATOY	'A S	NEAL	
First Name	Middle Na	me Last	Name

Case number (# known)_____

Part 3:	List Certain Payments You Made Bero	re Tou Filed	for Bankruptcy		
-					
6. Are eiti	her Debtor 1's or Debtor 2's debts primarily c	onsumer deb	ts?		
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a person			re defined in 11 U.S.C. § 10	1(8) as
	During the 90 days before you filed for bankru	ptcy, did you p	ay any creditor a total o	f \$6,425* or more?	
	☐ No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. Do child support and alimony. Also, do no	o not include p	ayments for domestic s	apport obligations, such as	
	* Subject to adjustment on 4/01/19 and every 3	3 years after th	at for cases filed on or	after the date of adjustment.	
☐ Yes	s. Debtor 1 or Debtor 2 or both have primarily	consumer de	bts.		
	During the 90 days before you filed for bankru			\$600 or more?	
	☑ No. Go to line 7.				
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include paymen	domestic supp	ort obligations, such as	child support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
			\$	\$	☐ Mortgage
	Creditor's Name				☐ Car
	Number Street				Credit card
					Loan repayment
					☐ Suppliers or vendors
	City State ZIP Code				Other
	- 4				

☐ Mortgage

■ Mortgage

☐ Loan repayment ☐ Suppliers or vendors

Car Credit card

Other _

□ Loan repayment□ Suppliers or vendors□ Other _____

Car Credit card

Creditor's Name

Number Street

Creditor's Name

Number Street

State

State

ZIP Code

ZIP Code

City

City

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City

State

ZIP Code

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Debtor 1

LATOYA	0	NIE A I	
LAIOIA	3	INEAL	
First Name	Middle Name	Last Name	

Case number (if known)_____

Part 4:	Identify Legal Actions, Reposs	essions	s, and Foreclosures			
List all	n 1 year before you filed for bankrupt I such matters, including personal injury ontract disputes.					
∑ No						
	es. Fill in the details.					
		Nature	of the case	Court or agency	,	Status of the case
С	case title ENR Realty Managemer	Eviction	on	Circuit Court	of 18th Judicial Circu	Pending
				505 COUNT	Y FARM ROAD	On appeal Concluded
С	ase number 2017 LM 2039			Wheaton City	IL 60185 State ZIP Code	
С	ase title			Court Name		Pending On appeal
 C:	ase number			Number Street		Concluded
				City	State ZIP Code	***
			Describe the property		Date	Value of the property
	SOUTHERN AUTOMOTIVE	FINAL	2207 INIFITY FX 35		09/24/2017	\$7,000.00
	5900 LAKE ELLENOR DRIVE Number Street	<u> </u>	Explain what happened		•	
			Property was reposed Property was forecle			
		809	Property was garnis	hed.		
	City State ZIP Cod	de	Property was attach Describe the property	ed, seized, or levie	Date	Value of the property
	Creditor's Name					\$
	Number Street		Explain what happened			
			Property was reposs Property was forecld			
	City State ZIP Coo	de	Property was garnis		ed.	

Document Page 42 of 50 Debtor 1 Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Z No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street State ZIP Code Last 4 digits of account number: XXXX-8 2 8 6 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? M No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☑ No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you __ Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift Number Street State ZIP Code

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Person's relationship to you _

Desc Main

Case number (if known)_

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Yes. Fill in the details for each gift or co	ontribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$
	_		\$
Number Street			
City State ZIP Code			
List Certain Losses			
in 1 year before you filed for bankru	ptcy or since you filed for bankruptcy, did you lose anything	because of theft,	fire, other
ster, or gambling?			
No Yes. Fill in the details.			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	**************************************		\$
			Ψ
· · · · · · · · · · · · · · · · · · ·	<u> </u>		Ψ
List Certain Payments or Trai	nsfers		Ψ
in 1 year before you filed for bankrup consulted about seeking bankruptcy	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition?		
in 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition pr	otcy, did you or anyone else acting on your behalf pay or tran		
in 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition provide	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition?		
in 1 year before you filed for bankrup consulted about seeking bankruptcy de any attorneys, bankruptcy petition pr lo 'es. Fill in the details.	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition?		
nin 1 year before you filed for bankrup consulted about seeking bankruptcy ide any attorneys, bankruptcy petition provided No Yes. Fill in the details.	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your Description and value of any property transferred	ur bankruptcy. Date payment or transfer was	to anyone Amount of paymen
in 1 year before you filed for bankrup consulted about seeking bankruptcy ide any attorneys, bankruptcy petition provided No Yes. Fill in the details.	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your Description and value of any property transferred	ur bankruptcy. Date payment or transfer was	to anyone
nin 1 year before you filed for bankrup consulted about seeking bankruptcy ide any attorneys, bankruptcy petition provided No Yes. Fill in the details.	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your Description and value of any property transferred	ur bankruptcy. Date payment or transfer was	to anyone Amount of paymen
nin 1 year before you filed for bankrup consulted about seeking bankruptcy ide any attorneys, bankruptcy petition provided No Yes. Fill in the details.	otcy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your Description and value of any property transferred	ur bankruptcy. Date payment or transfer was	to anyone Amount of paymen

Debtor 1

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		Description and value of any proper	ty transferred	Date payment or	Amount of
		the second control of		transfer was made	payment
	Person Who Was Paid	Andrew			\$
	Number Street	and			¥
					\$
i	City State ZIP Code	and			
Ĭ	Email or website address	_			
i	Person Who Made the Payment, if Not You				
) N	ot include any payment or transfer that o es. Fill in the details	t you listed on line 16.			
4 11	es. Fill III the details.	Description and value of any property	. transformed	Data navenant an	4
		Description and value of any property	y transierreu	Date payment or transfer was made	Amount of pay
Ĭ	Person Who Was Paid	<u></u>		made	
i	Number Street	Andrew Control of the		PA	\$
i	Number Street	nava.		Parameter and the control of the con	\$
	City State ZIP Code				\$ \$
/ithinansi ansi iclud o no l No	City State ZIP Code n 2 years before you filed for bankri ferred in the ordinary course of you le both outright transfers and transfers of include gifts and transfers that you h	made as security (such as the granting			
fithin ansi Iclud o no I No	City State ZIP Code n 2 years before you filed for bankri ferred in the ordinary course of you le both outright transfers and transfers it include gifts and transfers that you h	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty).
ithin ansi clud o no l No	City State ZIP Code n 2 years before you filed for bankri ferred in the ordinary course of you le both outright transfers and transfers it include gifts and transfers that you h	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property	of a security interest or m Describe any property of	ortgage on your prop or payments received uge	perty). Date transf
ifithing ansition of the column of the colum	City State ZIP Code n 2 years before you filed for bankri ferred in the ordinary course of you le both outright transfers and transfers at include gifts and transfers that you ho es. Fill in the details.	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transf
ifithing ansition of the column of the colum	City State ZIP Code n 2 years before you filed for bankri ferred in the ordinary course of you le both outright transfers and transfers at include gifts and transfers that you h bo es. Fill in the details.	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transf
fithin anst clud o no	City State ZIP Code n 2 years before you filed for bankriferred in the ordinary course of you lee both outright transfers and transfers it include gifts and transfers that you hold bes. Fill in the details. Person Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transfe
ithiu ansi clud o no	City State ZIP Code In 2 years before you filed for bankriferred in the ordinary course of you lee both outright transfers and transfers it include gifts and transfers that you hold bes. Fill in the details. Person Who Received Transfer Street State ZIP Code	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transfe
ithiu ansi clud o no	City State ZIP Code n 2 years before you filed for bankriferred in the ordinary course of you lee both outright transfers and transfers it include gifts and transfers that you hold bes. Fill in the details. Person Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transf
ifithing ansition of the column of the colum	City State ZIP Code In 2 years before you filed for bankriferred in the ordinary course of you lee both outright transfers and transfers it include gifts and transfers that you hold bes. Fill in the details. Person Who Received Transfer Street State ZIP Code	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transf
ifithing ansignment of the color of the colo	City State ZIP Code In 2 years before you filed for banking ferred in the ordinary course of you lee both outright transfers and transfers at include gifts and transfers that you ho lees. Fill in the details. Person Who Received Transfer Ferson Who Received Transfer Person's relationship to you erson Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transf
FP FR	City State ZIP Code In 2 years before you filed for bankri ferred in the ordinary course of you le both outright transfers and transfers of include gifts and transfers that you h co less. Fill in the details. Person Who Received Transfer Jumber Street City State ZIP Code Person's relationship to you	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transf
ifithing ansignment of the color of the colo	City State ZIP Code In 2 years before you filed for banking ferred in the ordinary course of you lee both outright transfers and transfers at include gifts and transfers that you ho lees. Fill in the details. Person Who Received Transfer Ferson Who Received Transfer Person's relationship to you erson Who Received Transfer	r business or financial affairs? made as security (such as the granting ave already listed on this statement. Description and value of property transferred	of a security interest or m Describe any property or debts paid in exchan	ortgage on your prop or payments received uge	perty). Date transfe

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Within are a b	beneficiary? (Th	e you file	ed for bankru often called a	uptcy, did you transfer any prope sset-protection devices.)	rty to a self-settled tru	ust or similar device of	which you
	s. Fill in the deta	ils.					
				Description and value of the prop			Date transfer was made
Nar	me of trust						
							\$ \$ \$
							3
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rt 8:	List Certain F	Inancia	al Accounts	s, Instruments, Safe Deposit	Boxes, and Storag	ge Units	
□ No	s. Fill in the deta						
□ No				Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	
□ No □ Yes		ails.		Last 4 digits of account number		closed, sold, moved,	
No Yes	s. Fill in the deta	ails.			instrument	closed, sold, moved,	
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State

ZIP Code

City

□ No □ Yes

Case 17-31760 Doc 1 Filed 10/24/17 Entered 10/24/17 12:51:17 Document Page 46 of 50 Case number (if know. 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? ☐ No Name of Storage Facility ☐ Yes Number Street Number Street City State ZIP Code City State ZIP Code **Identify Property You Hold or Control for Someone Else** 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street

ZIP Code

Part 10: **Give Details About Environmental Information**

ZIP Code

For the purpose of Part 10, the following definitions apply:

State

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

City

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	-	
Number Street	Number Street	m	
	City State ZIP Code	-	
City State ZIP Code			

Debtor 1

Part 9:

M No

City

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LATOYA S

Debtor 1

NEAL

First Name Middle Name			
to you positive and any	18 af ann an 19 ann a		
e you notified any governmental un	It of any release of hazardous mater	ial?	
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notic
		The second of th	
Name of site	Governmental unit	_	
	Governmental unit		
Number Street	Number Street		
	City State ZIP Code	-	
	ony one an object		
City State ZiP Code			
e you been a party in any judicial or	administrative proceeding under an	y environmental law? Include settlement	s and orders
No		•	
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the
Case title			Case
	Court Name	<u> </u>	Pending
V-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0			On appe
			- Chappe
	Number Street	WWW.	
Case number			
Case number	Number Street City State ZIP Cod	je	
Give Details About Your B	City State ZIP Coo usiness or Connections to Any uptcy, did you own a business or hi	Business ave any of the following connections to a	Conclud
1: Give Details About Your B	usiness or Connections to Any uptcy, did you own a business or hid in a trade, profession, or other ac mpany (LLC) or limited liability parti	Business ave any of the following connections to a tivity, either full-time or part-time	Conclud
Give Details About Your B in 4 years before you filed for bankr A sole proprietor or self-employe A member of a limited liability col A partner in a partnership	usiness or Connections to Any uptcy, did you own a business or hid in a trade, profession, or other ac mpany (LLC) or limited liability parti	Business ave any of the following connections to a tivity, either full-time or part-time nership (LLP)	Conclud
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	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
Business Name		Do not mediae docal decurity hamber of this
		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
	enconnect announced during	From To
City State ZI	P Code	·
	the second control of	
titutions, creditors, or other par No Yes. Fill in the details below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street		
Number Street		
The state of the s		
City State 7IF	Code	
City State ZIF	Code	
City State 2IF	Code	
	Code	
12: Sign Below		
sign Below nave read the answers on this S nswers are true and correct. I un connection with a bankruptcy of U.S.C. §§ 152, 1341, 1519, and	tatement of Financial Affairs and any attachments, and any attachments, and and that making a false statement, concealing case can result in fines up to \$250,000, or imprison 3571.	property, or obtaining money or property by fraud
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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:)	
LaToya S Neal)	
Debtor (s)) Case No.	
) Chapter	13
)	

List of Creditors

SAFCO - SOUITHERN AUTO FINANCE 5900 LAKE ELLENOR DRIVE SUITE 500 ORLANDO, FL 32809-4643	JP MORGAN CHASE National Bank By Mail P O Box 36520 Louisville, KY 40233-6520
COMED	U.S. Department of Education
PO BOX 6111	400 Maryland Avenue, SW
CAROL STREAM, IL 60197-6111	Washington, D.C. 20202
XFINITY - COMCAST 155 INDUSTRIAL DRIVE ELMHURT IL 60126-1618	GREAT LAKES CREDIT UNTION P.O. Box 1289 Bannockburn, IL 60015
AMERICASH LOANS	Verizon Wireless Bankruptcy Administration
PO BOX 184	500 Technology Drive Suite 550
DES PLAINES IL 60016	Weldon Spring, MO 63304
ENR REALTY / HUGO LI	CAPITOL ONE BANK
2036 Glen Ellyn Rd,	PO BOX 30281
Glendale Heights, IL 60139	SALT LAKE CITY UTAH 84130

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DIDECT LO LAVO	
DIRECT LOANS PO BOX 5609	IDES
GREENVILLE TX 75403	900 South Spring Stree Springfield, Illinois 62704-2725
	Springheid, minors 62704-2725
MERCHANTS CREDIT	
223 W JACKSON BLVD	
CHICAGO IL 60606	
	9,1